House of Representatives

File No. 706

General Assembly

January Session, 2013

(Reprint of File No. 173)

House Bill No. 6406
As Amended by House Amendment
Schedule "A"

Approved by the Legislative Commissioner
May 3, 2013

AN ACT CONCERNING THE ELECTRONIC PRESCRIPTION DRUG MONITORING PROGRAM.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. Subsection (j) of section 21a-254 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

(j) (1) The commissioner shall, within available appropriations, establish an electronic prescription drug monitoring program to collect, by electronic means, prescription information for schedules II, III, IV and V controlled substances, as defined in subdivision (9) of section 21a-240, that are dispensed by pharmacies, **[**and**]** nonresident pharmacies, as defined in section 20-627, outpatient pharmacies in hospitals or institutions or by any other dispenser, as defined in section 21a-240. The program shall be designed to provide information regarding the prescription of controlled substances in order to prevent the improper or illegal use of the controlled substances and shall not infringe on the legitimate prescribing of a controlled substance by a

prescribing practitioner acting in good faith and in the course of professional practice.

(2) The commissioner may identify other products or substances to be included in the electronic prescription drug monitoring program established pursuant to subdivision (1) of this subsection.

[(2)**]** (3) Each pharmacy, **[**and each**]** nonresident pharmacies, as defined in section 20-627, outpatient pharmacy in a hospital or institution and dispenser, as defined in section 21a-240, shall report to the commissioner, at least **[**twice monthly**]** weekly, by electronic means or, if a pharmacy or outpatient pharmacy does not maintain records electronically, in a format approved by the commissioner, the following information for all controlled substance prescriptions dispensed by such pharmacy or outpatient pharmacy: (A) Dispenser identification number; (B) the date the prescription for the controlled substance was filled; (C) the prescription number; (D) whether the prescription for the controlled substance is new or a refill; (E) the national drug code number for the drug dispensed; (F) the amount of the controlled substance dispensed and the number of days' supply of the controlled substance; (G) a patient identification number; (H) the patient's first name, last name and street address, including postal code; (I) the date of birth of the patient; (J) the date the prescription for the controlled substance was issued by the prescribing practitioner and the prescribing practitioner's Drug Enforcement Agency's identification number; and (K) the type of payment.

[(3)**]** (4) The commissioner may contract with a vendor for purposes of electronically collecting such controlled substance prescription information. The commissioner and any such vendor shall maintain the information in accordance with the provisions of chapter 400j.

[(4)**]** (5) The commissioner and any such vendor shall not disclose controlled substance prescription information reported pursuant to subdivision **[**(2)**]** (3) of this subsection, except as authorized pursuant to the provisions of sections 21a-240 to 21a-283, inclusive. Any person

who knowingly violates any provision of this subdivision or subdivision **[**(3)**]** (4) of this subsection shall be guilty of a class D felony.

[(5)**]** (6) The commissioner shall provide, upon request, controlled substance prescription information obtained in accordance with subdivision **[**(2)**]** (3) of this subsection to the following: (A) The prescribing practitioner who is treating or has treated a specific patient, provided the information is obtained for purposes related to the treatment of the patient, including the monitoring of controlled substances obtained by the patient; (B) the prescribing practitioner with whom a patient has made contact for the purpose of seeking medical treatment, provided the request is accompanied by a written consent, signed by the prospective patient, for the release of controlled substance prescription information; or (C) the pharmacist who is dispensing controlled substances for a patient, provided the information is obtained for purposes related to the scope of the pharmacist's practice and management of the patient's drug therapy, including the monitoring of controlled substances obtained by the patient. The prescribing practitioner or pharmacist shall submit a written and signed request to the commissioner for controlled substance prescription information. Such prescribing practitioner or pharmacist shall not disclose any such request except as authorized pursuant to sections 20-570 to 20-630, inclusive, or sections 21a-240 to 21a-283, inclusive.

(7) No person or employer shall prohibit, discourage or impede a prescribing practitioner or pharmacist from requesting controlled substance prescription information pursuant to this subsection.

[(6)**]** (8) The commissioner shall adopt regulations, in accordance with chapter 54, concerning the reporting, evaluation, management and storage of electronic controlled substance prescription information.

(9) The provisions of this section shall not apply to samples of

controlled substances dispensed by a physician to a patient.

Sec. 2. Section 21a-317 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

Every practitioner who distributes, administers or dispenses any controlled substance or who proposes to engage in distributing, prescribing, administering or dispensing any controlled substance within this state shall (1) obtain a certificate of registration issued by the Commissioner of Consumer Protection in accordance with the provisions of this chapter, and (2) register for access to the electronic prescription drug monitoring program established pursuant to subsection (j) of section 21a-254, as amended by this act. Registration for access to said program shall be in a manner prescribed by said commissioner.

This act shall take effect as follows and shall amend the following sections:		
Section 1	*from passage*	21a-254(j)
Sec. 2	*from passage*	21a-317

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: None

Municipal Impact: None

Explanation

There is no fiscal impact to the Department of Consumer Protection (DCP) in requiring additional prescription information reporting by impacted entities as the DCP prescription monitoring system requires no modifications due to the bill.

House "A" (LCO 6239) is technical/procedural and results in no fiscal impact.

The Out Years

State Impact: None

Municipal Impact: None

OLR Bill Analysis

HB 6406 (as amended by House "A")*

AN ACT CONCERNING THE ELECTRONIC PRESCRIPTION DRUG MONITORING PROGRAM.

SUMMARY:

This bill expands the electronic prescription drug monitoring program by requiring prescription information reporting by (1) out-of-state pharmacies that ship, mail, or deliver prescription drugs into the state and (2) any other drug dispensing practitioner. It exempts physicians from having to report dispensing samples of controlled substances to patients. Practitioners include certain medical professionals (physicians, dentists, veterinarians, and podiatrists), researchers, pharmacies, hospitals, and other people or institutions permitted to dispense drugs in the course of professional practice or research. Currently, pharmacies and out-patient pharmacies in hospitals or institutions must report information.

Currently, the program collects information on schedules II through V controlled substances. The bill allows the Department of Consumer Protection (DCP) commissioner to identify additional products to be included in the program.

The bill requires a weekly report from covered pharmacies and practitioners, rather than the twice monthly report currently required.

The bill prohibits any person or employer from preventing a participating prescribing practitioner or pharmacy from requesting controlled substance prescription information from DCP.

The bill requires practitioners who distribute, administer, or dispense controlled substances, or who seek to do so, to register for

access to the program, in a manner DCP's chooses, in addition to the current requirement for such practitioners to register with DCP. These practitioners include certain medical professionals (physicians, dentists, veterinarians, podiatrists, optometrists, physician assistants, advanced practice registered nurses, and nurse-midwives), scientific investigators, hospitals, and other people or institutions who dispense in the course of professional practice or research.

*House Amendment "A" exempts physicians from having to report dispensing samples of controlled substances to patients.

EFFECTIVE DATE: Upon passage

BACKGROUND

Electronic Prescription Drug Monitoring Program

This program requires DCP to collect prescription information to prevent improper or illegal drug use. Pharmacists must electronically report certain drug information to DCP, including the dispensing date, dispenser identification and prescription number, and certain patient identification data.

Related Bills

HB 6389, reported favorably by the Public Health Committee, also requires practitioners who distribute, administer, or dispense controlled substances, or who seek to do so, to register for access to the program.

HB 5906, reported favorably by the General Law Committee, requires practitioners who distribute, prescribe, administer, or dispense controlled substances, or who seek to do so, to access the program and review their patient's history with controlled substances before doing so.

COMMITTEE ACTION

General Law Committee

Joint Favorable

Yea 18 Nay 0 (03/12/2013)